



RESPONSE TRANSMITTAL LETTER

3/17/08
JW/S

Docket Number
EMS-06901

Application Number 10/720,969	Filing Date November 24, 2003	First Named Inventor Haim KOPYLOVITZ	Group Art Unit 2167
Invention Title PERSISTENT RESTORE OF VIRTUAL DEVICES	Examiner		

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is a response in the above-identified application, including:

- Response;
- Response Transmittal (in duplicate)
- Terminal Disclaimer
- Return Postcard

CLAIMS AS PRESENTED

	(1) CLAIMS AS PRESENTED		(2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(3) PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	18	Minus	20	0	x \$ 50	\$
INDEPENDENT CLAIMS	2	Minus	3	0	x \$210	\$
MULTIPLE DEPENDENT CLAIM ADDED					\$370	\$
				TOTAL	\$	
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.			SMALL ENTITY TOTAL		\$	

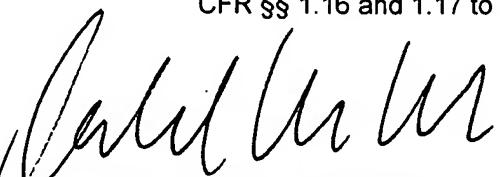
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the highest number previously paid for Total Claims in column 2 is less than 20, enter "20."

*** If the highest number previously paid for Independent Claims in column 2 is less than 3, enter "3."

The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.

- Please charge Deposit Account Number 05-0889 in the amount of \$130 (Terminal Disclaimer). A duplicate copy of this sheet is enclosed.
- Please charge \$ _____ to our credit card. Attached is PTO Form 2038.
- A check in the amount of \$ _____ to cover the filing fee is enclosed.
- Please credit any overpayment and/or charge any additional filing fees required under 37 CFR §§ 1.16 and 1.17 to our Deposit Account Number 50-3596.

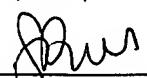

Donald W. Muirhead, Reg. No. 33,978

March 17, 2008

Date

Customer No. 52427

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is being deposited with the United States
Postal Service as first class mail in an
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P.O. Box 1450, Alexandria, VA 22313-1450
on March 17, 2008.


Sandra Pires